

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO

10676424

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2	1					
3		1				
4		1				
5		2				
6		2				
7		2				
8		2				
9	1					
10	1					
11		2				
12		2				
13		2				
14		2				
15	1					
16		1				
17		1				
18		1				
19		1				
20	1					
21		2				
22		2				
23	1					
24	1					
25		2				
26		2				
27		2				
28		2				
29		7				
30		7				
31		7				
32		7				
33		5				
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47						
48						
49						
50						
TOTAL IND.	8					
TOTAL DEP.	62					
TOTAL CLAIMS	80					

	IND	DEP	IND	DEP	IND	DEP
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52						
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99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

34
31
65